



COMMONWEALTH of VIRGINIA

Department for the Aging

Jay W. DeBoer, J.D., Commissioner

TABLE OF CONTENTS AAA TUESDAY E-MAILING March 16, 2004

SUBJECT	VDA ID NUMBER
<u>Caregiver Coalition Training</u> (Ellen Nau)	04-110
<u>GrandDriver Program</u> (Janet Honeycutt)	04-111
<u>National Aging Information & Referral/Assistance Symposium</u> (Faye D. Cates)	04-112
<u>Adult Day Care – Best Practices</u> (Ellen Nau)	04-113

COMMONWEALTH of VIRGINIA

Department for the Aging

Jay W. DeBoer, J.D., Commissioner

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Ellen Nau, Human Services Program Coordinator

DATE: March 16, 2004

SUBJECT: Caregiver Coalition Training

Virginia Department for the Aging Commissioner Jay DeBoer will greet participants at a March 17-18, 2004 training to establish a statewide Caregivers' Coalition in Virginia. Twenty-two individuals from various governmental agencies, non-profits and the private sector will meet at Senior Connections, the Capital Area Agency on Aging to participate in the training sponsored by AARP. The training, based on the experience and best practices of existing caregiver coalitions, will focus on forming and sustaining a statewide caregiver coalition. The U.S. Administration on Aging and the AARP Foundation provided funding for the project. Virginia was one of eight states selected to receive this training in 2004.

Helen Elzeroth, Caregiver Coalitions Research Project Manager at AARP and Brian Duke, Associate Fellow of the Institute on Aging of the University of Pennsylvania, will conduct the training. Ms. Elzeroth received her undergraduate degree in education from the University of Indiana and a M.S. in Gerontology from Virginia Commonwealth University. She has significant work experience in business management, education and human services. Mr. Duke received his Bachelor of Science degree in Business Administration from the University of Scranton, a Master's degree in Health Sciences Administration from The George Washington University and a Master of Bioethics degree from the University of Pennsylvania. He serves as consultant on family caregiver issues and co-leads the "Caring Community" coalition comprised of community based organizations in Philadelphia, Pennsylvania convened by WHYY, a public broadcasting television and radio station.

SUBJECT: Caregiver Coalition Training

Page 2 of 2

Ellen Nau, program coordinator for VDA's National Family Caregiver Support Program serves as project coordinator. Thelma Bland Watson, Executive Director of Senior Connections, the Capital Area Agency on Aging and Gale Davis, Manager, Caregiver Support Services at Senior Connections are hosting the event.

COMMONWEALTH of VIRGINIA

Department for the Aging

Jay W. DeBoer, J.D., Commissioner

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Janet L. Honeycutt
Director of Grant Operations

DATE: March 16, 2004

SUBJECT: GrandDriver Program

Attached, please find some details about a new and exciting grant-funded program that VDA is implementing throughout Virginia. The GrandDriver Program is being funded by DMV through a grant from the Federal Transportation Safety Fund. VDA is the grant recipient and will be developing the GrandDriver concept in more detail over the next two months.

With the Kick-off for this program slated for May 2004, we expect that each of you may receive calls from people who are interested in additional information about aging and driving. VDA will be sending each of you information, brochures, websites and referral lists to supply to your callers.

If you have any questions about this program, please let me know.

Attachment



2004 Virginia's GrandDriver Program

**Sponsored by the Virginia Department for the Aging
and the Virginia Department of Motor Vehicles
in cooperation with the American Association of Motor Vehicle
Administrators**

Official Kickoff Date

May 2004 to coincide with the federal Administration on Aging's Older American's Month and with Virginia's Older Virginians Month activities.

Overview

While most older drivers may be good drivers, the physical changes associated with aging can ultimately affect our ability to drive safely. That's why the American Association of Motor Vehicle Administrators and its partners in Virginia, have created "GrandDriver", a program that provides information about aging and driving.

Virginia's GrandDriver program is urging the public - particularly drivers over 65 and their adult children - to learn more about the effects of aging on our ability to drive and to talk about these issues. The program will provide information on the signs that your driving may be affected, what you can do to remain a safe driver and places you can turn if you need assistance. These should help you and your loved ones continue to "get around safe and sound."

The GrandDriver program:

- Is an education and awareness campaign about the effects of aging on driving ability;
- Seeks to encourage the public to plan ahead for safe mobility before their later years;
- Gives older Virginians and their families suggestions to improve driving skills and provides resources that will help older drivers compensate for age-related changes so they can stay on the road as safely as possible, for as long as possible; and
- Offers suggestions for alternative forms of transportation to help older Virginians maintain their mobility and independence.

The GrandDriver program proposes to work with state and local partners to develop:

- A GrandDriver Program informational card to be sent with all vehicle registration to all Virginia drivers;
- GrandDriver Program information to be sent out in Virginia AARP mailings;
- GrandDriver Program information to be sent out in American Automobile Association of Virginia mailings;
- GrandDriver articles will be developed and published in local Area Agency on Aging newsletters;
- GrandDriver articles in the VCU “Age in Action” quarterly publication;
- Billboards advertising GrandDriver;
- GrandDriver signage on public transportation (i.e. buses, cabs, etc.);
- A GrandDriver page to be added to VDA’s website and DMV, AARP, AAA of Virginia, and others can link to the VDA page;
- Utilize the existing VDA nationwide toll free number for additional information/referral;
- Public Radio;
- Public and local Television – using Governor Warner as a spokesperson; and
- GrandDriver information made available at all statewide events (i.e. conferences, workshops, public events, health fairs, etc.).

Partners

GrandDriver program partners will work with the Department for the Aging and DMV to “get the word out” about the effects of aging on our ability to drive, the warning signs that may indicate problems driving safely, and alternatives that may help older drivers and their families deal with aging and driving.

Partners will be encouraged to include their corporate logos on GrandDriver materials developed and distributed in Virginia and to incorporate information about GrandDriver into their programs and materials.

Actions to Date

VDA has contracted with CommuniQue Marketing here in Richmond to develop the “Virginia Specific” ad and to integrate this “look and feel” throughout the television, radio and written media. They are in the process of buying time for the television and radio ads to run. Governor Warner will be the program spokesperson.

We have also contracted with Commonwealth Poll, Virginia Commonwealth University, to conduct a statewide pre and post survey to measure public awareness of the effects of aging on driving. This will give us a measurable delivery on how well the program is working in the state.

We have assembled a Task Force for this program to meet periodically during the campaign to make suggestions and offer advice to continually keep the program fresh. Our first meeting was Friday, March 12, 2004. Members include employees from Virginia Department of Motor Vehicles, Glennan Center for Geriatrics and Gerontology at Eastern Virginia Medical School, AARP, AAA of Virginia, Virginia Department of Health, VCU Biomedical Engineering Program, Department of Rehabilitative Services, MS OTR from Johnston Willis Hospital, Senior Connections, the Capital Area Agency on Aging and the Alzheimer’s Association.

We will be supplying the Area Agencies on Aging brochures and referral information about the program so that they can share this information to anyone who inquires about the program. We expect that once the campaign kicks off in May, you will see an increase in call volume for this program.

COMMONWEALTH of VIRGINIA

Department for the Aging

Jay W. DeBoer, J.D., Commissioner

MEMORANDUM

TO: Executive Directors - Area Agencies on Aging
AAA Information and Referral/Assistance Staff

FROM: Faye D. Cates, MSSW, Human Services Program Coordinator

DATE: March 16, 2004

**SUBJECT: NATIONAL AGING INFORMATION & REFERRAL/ASSISTANCE
SYMPOSIUM**

The National Aging Information & Referral Support Center is very pleased and excited to invite persons in the field of aging to The National Aging Information & Referral/Assistance Symposium convened in conjunction with the Alliance of Information and Referral System's (AIRS).

"Catch the Wave of I&R" 2004 Training and Education Conference
Norfolk Waterside Marriott
Norfolk, Virginia
May 3-6, 2004

Pre-Conference Sessions, including the State Unit on Aging and the Area Agency on Aging retreats, will take place on May 2nd in the same location.

I have attached a Preliminary agenda for your dissemination and consideration. The last page gives a bit more information about registration for the AIRS conference.

Registration information can be found at the AIRS website: www.airs.org.



Preliminary Agenda

YOU ARE INVITED...

NATIONAL AGING I&R SYMPOSIUM

National Association of State Units on Aging

Convened in conjunction with the AIRS Conference

Norfolk, VA

May 3-6, 2004

Sponsor: National Aging I&R Support Center, National Association of State Units on Aging

Co-Sponsors: Administration on Aging
National Association of Area Agencies on Aging
Virginia Department for the Aging
Senior Services of Southeastern Virginia (AAA)

Contact: Susan Shepherd, Senior Program Associate
National Aging I&R Support Center, National Association of State Units on Aging
Phone: 202-898-2578 E-mail: sshepherd@nasua.org

Sunday, May 2, 2004

Pre-Conference Activities

Aging Network Retreat

- State Units on Aging
- Area Agencies on Aging

Tuesday, May 4, 2004

Luncheon

Co-Sponsors: National Aging I&R Support Center (NASUA)
Virginia Department for the Aging
Virginia Association of Area Agencies on Aging

Keynote Speaker: **Josefina Carbonell**
Assistant Secretary for Aging
U.S. Department of Health and Human Services
(Invited)

Aging I&R/A Symposium Workshops

- ***Maximizing Technology to Support the Care Team: SeniorNavigator, Virginia's Number One Resource for Aging Information, and the Caregiver Connection, an Innovative Care Planning Tool***
 - **Faye D. Cates**, MSSW
Human Services Program Coordinator
Virginia Department for the Aging
Richmond, Virginia
 - **Daniel M. Phillips**, Advocate for Male Caregivers
Retired Lieutenant Colonel, U.S. Army
Yorktown, Virginia
 - **Katie Roeper**, Director of Senior Navigator
SeniorNavigator.com
Richmond, Virginia
 - **Gail Davis**, Manager of Caregiver Support
Senior Connections, The Capital Area Agency on Aging
Richmond, VA 23219
 - **Gene Cruey**, President
Alpha Business Solutions
Richmond, VA
 - **Sandra Randell**, Vice President of Marketing
Alpha Business Solutions
Richmond, VA
- ***Aging and Disability Resource Center Initiative: Streamlining Access to Long Term Care***
 - **Greg Case**, Aging Services Program Specialist
Center for Planning and Policy Development
Administration on Aging
Washington, DC
 - **Dina Elani**, Senior Policy Advisor for Community-Integrated Resources
Division for Community and Systems Improvement
Center for Medicaid and State Operations
Centers for Medicare and Medicaid Services
Baltimore, MD
 - **Representatives**, State Aging and Disability Resource Centers
- ***New Strategies and Partnerships for Expanding the Role of Aging I&R/As***
 - **John Skirven**, Executive Director,
Senior Services of Southeastern Virginia

Norfolk, Virginia

Cheryl Schramm, Director
Aging Services Division
Atlanta Regional Commission
Atlanta, GA 30303

▪ ***Medicare Reform and Prescription Rx: Implications for I&R/As***

- **Dennis Carroll**, Associate Regional Administrator
Centers for Medicare & Medicaid Services (CMS), Region III
Philadelphia, Pennsylvania 19106
- **Representative**, State Health Information and Counseling Program
- **Mark Miller**, National Long Term Care Ombudsman Program
National Association of State Units on Aging
- **Rona McNally**, Manager, Missouri Senior Medicare Patrol
- **Representative**, I&R

▪ ***Housing Transitions and Modifications - New Resources for I&R/A's***

- **Irma Tetzloff**, Supervisor Aging Services Program Specialist
Center for Wellness and Community-Based Services
Administration on Aging
Washington, DC
- **Charlotte Wade**, Director
National Center for Seniors Housing Research
NAHB Research Center
Upper Marlboro, MD
- **Lee Berkley Shaw**, Program Manager
Home Modification Initiative
Rebuilding Together
Washington, DC
- **Margit Novak**, President
National Association of Senior Move Managers
Wynnewood, PA

▪ ***Consumer Direction in OAA Services: What Does It Mean for I&R/As?***

- **Bob Hornyak**, Director
Center for the Advancement of State Community Service Programs
National Association of State Units on Aging
Washington, DC
- **Kari Benson**

Center for Planning and Policy Development
Administration on Aging
Washington, DC

- **Barbara Kelley**
Director of the Division of Consumer Information and Caregiver Services
South Carolina Bureau of Senior Services
Columbia, SC
- **Irene Collins**, Executive Director
Department of Senior Services
Montgomery, AL

▪ ***Successful Strategies to Reach The Emerging Male Caregiver***

- **Greg Link**, Program Associate (Moderator)
National Association of State Units on Aging
Washington DC
- **Maryam Navaie-Waliser**, Dr.P.H., Senior Research Associate
Center for Home Care Policy and Research
Visiting Nurse Service of New York
New York, New York
- **Daniel M. Phillips**, Lt. Colonel, U.S. Army, Retired
Male Advocate for Caregivers
Yorktown, Virginia
- **Jim Hutchinson**, Navy Counselor Chief Petty Officer, USN, Retired
Male Military Advocate for Caregivers
Senior Services of Southeastern Virginia (AAA)
Norfolk, Virginia

▪ ***Assessment and Case Management Enhanced Technology: Washington State Implementation of the Comprehensive Assessment Reporting Evaluation (CARE)***

- **Kristin Byrne**, MA, CARE Program Manager
Washington Aging and Disability Services Administration
Olympia, WA

▪ ***Update on National Initiatives Impacting I&R/As: U.S. Administration on Aging, Eldercare Locator, National Aging I&R Support Center***

- **Sherri Clark**, Aging Services Program Specialist
Center for Communication & Consumer Services
Administration on Aging
Washington, DC
- **Share Maack**, Manager
Eldercare Locator
National Association of Area Agencies on Aging
Washington, DC

- **Susan Shepherd**, Senior Program Associate
National Aging I&R/A Support Center
National Association of State Units on Aging
Washington, DC
- **Theresa Lambert**, Deputy Director
National Association of State Units on Aging
Washington, DC 20005
- ***Understanding Transportation Systems—Maximizing Options for Older Consumers and Persons with Disabilities***
 - **Bryna Helfar**
Federal Transit Administration
Department of Transportation
Washington, DC
 - **Kari Benson**, Aging Services Program Specialist
Center for Planning and Policy Development
Administration on Aging
Washington, DC

Concurrent Sessions for the Aging Symposium

- ***Serving Family Caregivers of the Elderly Through A Collaborative, Statewide Information and Assistance Program***
 - **Ginny Paulson**, Program Manager
Iowa Family Caregiver Program
Iowa Association of Area Agencies on Aging
Des Moines, Iowa
- ***Elder Abuse: A National Perspective and Promising Practices from the Field***
 - **Suzanne Linnane Stack**, Elder Rights Program Associate
National Center on Elder Abuse
National Association of State Units on Aging
Washington, DC
 - **Tina Taylor**, Community Resource Advisor
INFO LINE of Los Angeles
San Gabriel, CA 91776
 - **Lena Jones**, Community Resource Advisor
INFO LINE of Los Angeles
San Gabriel, CA

Please See AIRS Conference Registration Information on Next Page



**"Catch the Wave of I&R"
2004 Training and Education Conference
Norfolk, Virginia
Norfolk Waterside Marriott
May 3-6, 2004**



Excitement is building for the Alliance of Information and Referral Systems (AIRS) 2004 Information and Referral Training and Education Conference. The conference goal is to continue to advance the professionalism in the field of information and referral by encouraging the continuous commitment of participants to training and to provide the tools necessary to strengthen I&R service and communities. In order to achieve this goal we have invited speakers and presenters who represent a wide range of topics pertaining to I&R's role in Human Service. These presenters will focus on special topics such as computer and telephone technology basic skills in I&R, planning for disaster, management, resource development and many others. In addition to the aging track sponsored by The National Aging Information and Referral Support Center (NASUA) we have added a crisis intervention track sponsored by the American Association of Suicidology (AAS.)



There will also be several exciting Pre Conference Activities scheduled on May 1 & 2. The 2-1-1 Institute will start on May 1 at 12:00 PM and end on the 2nd at 4:30. The 2-1-1 Institute is the only national training for 2-1-1 Planners. AIRS is more excited about this year than ever before. We have collaborated with field experts and consultants to enhance the sessions and bring you timely, informative information. This year's institute will be held as a mini conference and will include workshops about Funding 2-1-1, including Funding Models, Marketing 2-1-1 and brand management, Technology Related to 2-1-1 and much more. We will also be introducing our 2-1-1 Planning Toolkit. Along with the 2-1-1 Institute, AIRS will be offering two Pre-conference Intensives on May 2 from 9:00 - 4:30. This year we are offering "ABC's of I&R" and "Volunteer Management 101." Please visit the AIRS Website for more information and registration.



The 2004 conference will be held in beautiful Norfolk, Virginia from May 3-6. Norfolk is a 400-year-old Mid Atlantic seaport in the midst of a stunning urban renaissance. The Norfolk Waterside Marriott sits in the heart of the new downtown Norfolk waterfront. The hotel is within walking distance of world-class museums, the battleship Wisconsin, performing arts theaters, distinctive restaurants, nightlife, shopping and more. Along with AIRS, the conference will be hosted by the local state affiliate, the Virginia Alliance of Information and Referral Systems (VAIRS.) VAIRS is an integral partner in the conference coordination and will be the local experts in Norfolk.

Conference registration is now available as well as valuable information about the conference workshops, pre conference activities, location and networking opportunities. Visit the AIRS Website at www.airs.org, then click Conference located on the left side navigation to access this information.

To download a copy of the Conference Registration brochure, please click the link below:
http://www.airs.org/downloads/2004_REG.pdf

See you in Norfolk!!!

Note: The conference registration brochure is in PDF Format. To read it you must have Adobe Acrobat Reader. You can download Adobe Acrobat Reader for free by visiting the link below.

<http://www.adobe.com/products/acrobat/readstep2.html>

COMMONWEALTH of VIRGINIA

Department for the Aging

Jay W. DeBoer, J.D., Commissioner

MEMORANDUM

TO: Executive Directors Area
Agencies on Aging

FROM: Ellen Nau, Human Services Program Coordinator

DATE: March 16, 2004

SUBJECT: Adult Day Care – Best Practices

The Alzheimer's Family Day Center (AFDC) in Falls Church, Virginia has developed an orientation/training checklist for employees at the center. This comprehensive orientation for persons working with individuals with Alzheimer's Disease or other forms of dementia in an adult day care setting is attached to this memorandum in pdf. format.

Lin Noyes, PhD, RN, Alzheimer's Family Day Center's founder and clinical director, presented the findings of "Demonstrating the Effects of Physical Therapy and Tai Chi for People with Alzheimer's Disease in Adult Day Care: Lessons Learned" at the National Adult Day Services Association's second conference on January 30-31 in New Orleans. Funded by a \$250,000 grant from the Administration on Aging, the demonstration revealed:

- Mobility issues come from normal aging, immobility, symptoms of Alzheimer's disease and premature caregiver interventions. This cascade of decline can be influenced by physical therapy interventions.
- Physical therapy works for people in mid to late stages of dementia in many cases when the family/caregiver is used as an interpreter and remedial communication techniques are used.
- Caregivers can learn transfer and mobility techniques to promote continued functioning in older adults with Alzheimer's disease. *

For twenty years the Alzheimer's Family Day Center has served persons in varying stages of dementia, including those in the late stages of the disease. With the help of a

SUBJECT: Adult Day Care – Best Practices
Page 2 of 2

Virginia Respite Care Grant from the Commonwealth of Virginia and issued by the Virginia Department for the Aging, the center will be moving to a new facility in March, 2004. For further information on AFDC, contact www.AlzheimersFDC.org.

* AFDC Press Release January 29, 2004

2/15/97

Caring for the Person with Dementia
in Adult Day Care

Name_____

Date of Employment_____

Staff Position_____

This checklist is designed to ensure that you receive all of the skills and information you need to begin working at the Alzheimer's Family Day Center. After completing sessions relevant to the category, fill in the PRESENTED BY and date column of the corresponding items.

A copy of this will be placed in your personal file at the Center.

Orientation Outline

Prerequisite to orientation

	Instructor	Date Completed
CPR	_____	_____
First Aid	_____	_____

Orientation

I. Introduction to the Alzheimer's Family Day Center

A.	Philosophy of caregiving	_____	_____
B.	Purpose of Center	_____	_____
C.	Program goals and objective	_____	_____
D.	Services		
1.	Day care	_____	_____
2.	Off Site Programs	_____	_____
3.	Support groups	_____	_____
4.	Education programs	_____	_____
5.	Volunteer programs	_____	_____
6.	Student intern/orientation	_____	_____
E.	Organization		
1.	Non-profit status	_____	_____
2.	Administration, Board and Staff		

	Introductions	_____	_____
3.	Chain of command	_____	_____
4.	Fees, charges for service, funding sources	_____	_____
F.	Orientation to physical plant		
1.	Participant areas	_____	_____
2.	Office locations	_____	_____
3.	Storage	_____	_____
4.	BR, Kitchen, & outside	_____	_____
5.	Location of phones and first aid kit	_____	_____
6.	Phone etiquette	_____	_____

II. Employee Issues

A.	Staff - who's who		
1.	Job descriptions	_____	_____
2.	Roles and Responsibilities	_____	_____
3.	Confidentiality re: participants	_____	_____
4.	Adult Protective Services Issues	_____	_____
B.	Employee Manual		
1.	Business Hours and Attendance Policy	_____	_____
2.	Personnel Policies	_____	_____
3.	Compensation, Recording Time	_____	_____
4.	Expense Reimbursement	_____	_____
5.	Evaluations	_____	_____
6.	Leave Policies	_____	_____
7.	Benefits	_____	_____
8.	Policies on Equal Employment Opportunities and Sexual Harassment	_____	_____
9.	Employee/Client relations	_____	_____

III. Safety Issues

A.	Location and use of fire extinguishers, alarm boxes, individual responsibilities	_____	_____
B.	In case of illness/injury	_____	_____
C.	In case of lost or missing participant	_____	_____

D.	In case of severe weather	_____	_____
E.	In case of aggression	_____	_____
F.	Universal precautions	_____	_____
IV.	Implications of the Aging Process for AFDC Participants		
A.	Developmental tasks of Aging		
1.	Life review	_____	_____
2.	Transcendence	_____	_____
3.	Facing death	_____	_____
B.	Physical Changes		
1.	Normal Sensory Changes		
a.	vision	_____	_____
b.	hearing	_____	_____
c.	smell	_____	_____
d.	taste	_____	_____
e.	touch	_____	_____
2.	Musculoskeletal changes		
a.	bones	_____	_____
b.	joints	_____	_____
c.	muscles, tendons, and cartilage	_____	_____
3.	Neurologic changes	_____	_____
4.	Respiratory changes	_____	_____
5.	Digestive system changes	_____	_____
6.	Circulatory system changes	_____	_____
7.	Genitourinary system changes	_____	_____
C.	Emotional Changes		
1.	Facing losses	_____	_____
2.	Facing aging	_____	_____
3.	Usefulness/Productivity issues	_____	_____
D.	Cognitive Changes		
1.	Effect of aging on intelligence	_____	_____
2.	Effect of aging on memory	_____	_____
3.	Effect of aging on learning	_____	_____
E.	Sociological and Religious aspects of Aging		
1.	Myths about aging	_____	_____
2.	Environmental concerns	_____	_____

	3.	Families and aging	_____	_____
	4.	Role of religion	_____	_____
	5.	Religiosity/Spiritual Needs	_____	_____
F.		Disease and Aging		
	1.	Common physiological disturbances of older adults		
	a.	digestive tract problems	_____	_____
	b.	musculoskeletal discomforts	_____	_____
	c.	vision problems	_____	_____
	d.	skin problems	_____	_____
	e.	circulatory problems	_____	_____
	f.	endocrine problems	_____	_____
V.		Adult Day Health Care Services		
A.		Personal care - overview of aid's role		
	1.	Toileting		
	a.	Providing physical assistance	_____	_____
	b.	Dealing with confusion	_____	_____
	c.	Equipment/supplies	_____	_____
	d.	Reporting problems	_____	_____
	e.	Charting output	_____	_____
	2.	Hygiene		
	a.	Hygiene needs in ADHC	_____	_____
	b.	Equipment/supplies	_____	_____
	c.	Reporting problems	_____	_____
	3.	Dressing		
	a.	Techniques related to selected disabilities (hemiparesis, confusion blindness, arthritis)	_____	_____
	b.	Procedure for storing extra clothing coat, personal items	_____	_____
	4.	Mobility and body mechanics		
	a.	Importance of body mechanics	_____	_____
	b.	Common mobility problems in ADHC	_____	_____
	c.	Transfer techniques		

- | | | | |
|----|---|-------|-------|
| 1. | Chair to standing and return | _____ | _____ |
| 2. | Bed to standing and return | _____ | _____ |
| 3. | Standing to toilet and return | _____ | _____ |
| 4. | Wheelchair transfers to and from
chair, toilet, bed | _____ | _____ |
| 5. | Tub/shower transfer, if
applicable | _____ | _____ |
| 6. | Active and passive ROM exercises | _____ | _____ |
| 7. | Positioning | _____ | _____ |
| 8. | Back Protection | _____ | _____ |
| d. | Mobility aids | | |
| 1. | Wheelchair | _____ | _____ |
| 2. | Walker | _____ | _____ |
| 3. | Quad cane | _____ | _____ |
| 4. | Orthopedic cane | _____ | _____ |
| e. | Special mobility issues for visually
and hearing impaired and confused
participants | _____ | _____ |

VI. Dementia and Its Effects on Participants

A. Medical description of disease

- | | | | |
|----|--------------------------------------|-------|-------|
| 1. | Signs and symptoms | _____ | _____ |
| 2. | Diagnosis | _____ | _____ |
| 3. | Medical management/role of physician | _____ | _____ |
| 4. | Use of medications | _____ | _____ |
| 5. | Course and progression of disease | _____ | _____ |

B. Patients perspective

- | | | | |
|----|-----------------------------------|-------|-------|
| 1. | Changes | | |
| a. | loss of abilities | _____ | _____ |
| b. | loss of role and responsibilities | _____ | _____ |
| c. | loss of control | _____ | _____ |
| 2. | Reaction to changes | | |
| a. | depression | _____ | _____ |
| b. | anxiety | _____ | _____ |
| c. | anger | _____ | _____ |
| d. | acceptance | _____ | _____ |

C. Family Perspective

- | | | | |
|----|-------------------------------------|-------|-------|
| 1. | Reactions to disease | _____ | _____ |
| 2. | Changing roles and responsibilities | _____ | _____ |
| 3. | Financial and societal adjustments | _____ | _____ |
| 4. | Grieving | _____ | _____ |

D. Recognizing signs of illness

- | | | | |
|----|--------------------------------------|-------|-------|
| 1. | Physical signs of illness/discomfort | _____ | _____ |
| 2. | Masking of symptoms | _____ | _____ |
| 3. | Behavior signs of illness/discomfort | _____ | _____ |

VII. Dementia Skills (Basic)

A. Attitudes and environments for caregiving

- | | | | |
|----|--|-------|-------|
| 1. | Effect of sensory stimuli on behavior | _____ | _____ |
| 2. | Effects of heat/cold, humidity and weather | _____ | _____ |
| 3. | Effects of physical environment | _____ | _____ |
| 4. | Effects of caregiving attitude | _____ | _____ |

B. Communication skills

- | | | | |
|----|--|-------|-------|
| 1. | Assume that the Alzheimer's patient understands everything you say | | |
| a. | get person's attention | | |
| 1. | look eye to eye | _____ | _____ |
| 2. | call person by name | _____ | _____ |
| 3. | use gentle touch | _____ | _____ |
| b. | deliver message | | |
| 1. | use simple adult words | _____ | _____ |
| 2. | slow down rate of speech | _____ | _____ |
| 3. | don't shout, lower pitch | _____ | _____ |
| 4. | one message at a time | _____ | _____ |
| c. | listen for response | | |
| 1. | allow time for response | _____ | _____ |
| 2. | repeat question using same words | _____ | _____ |
| 3. | help person put words together | _____ | _____ |
| 4. | validate meaning of response | _____ | _____ |
| 5. | watch body language | _____ | _____ |
| 6. | limit choices | _____ | _____ |

	7.	don't offer choices if there are none	_____	_____
	8.	ask uncomplicated questions, one at a time	_____	_____
2.		Use non-confronting, non-controlling statements		
	a.	agree first and then limit response	_____	_____
	b.	don't argue, change subject	_____	_____
	c.	identify feelings rather than argue fact	_____	_____
	d.	ignore repetitive statements if they are not emotionally charged	_____	_____
	e.	ask for cooperation and help	_____	_____
3.		Reassure and calm		
	a.	ask person to repeat the information you have provided	_____	_____
	b.	write a simple note	_____	_____
	c.	tell person that everything is going according to plan	_____	_____
	d.	use events rather than the clock to measure time	_____	_____
C.		Assisting with activities of daily living		
	1.	Assisting with eating and drinking	_____	_____
	2.	Assisting with mobility		
		a. physical assistance	_____	_____
		b. mobility aids	_____	_____
		c. limiting mobility	_____	_____
	3.	Maintaining healthy skin	_____	_____
	4.	Grooming	_____	_____
	5.	Assisting with toileting	_____	_____
D.		Body mechanics	_____	_____
VIII.		Dementia Skills (advanced)		
	A.	Wandering Interventions		
		1. Types of wandering	_____	_____

2.	Safety		
a.	environment	_____	_____
b.	identification	_____	_____
3.	Channeling Energy		
a.	structured walks	_____	_____
b.	medications	_____	_____
4.	Behavior modification	_____	_____
B.	Aggression Interventions		
1.	Review communication techniques	_____	_____
2.	Manipulating the environment to decrease aggression	_____	_____
3.	Behavioral approaches	_____	_____
4.	Safety issues	_____	_____
5.	Medications	_____	_____
C.	Managing Repetitive behaviors	_____	_____
D.	Managing hyperactivity		
1.	Behavior hyperactivity	_____	_____
2.	Verbal; hyperactivity	_____	_____
3.	Environmental adaptations	_____	_____
4.	Behavioral management	_____	_____
5.	Medications	_____	_____
E.	Coordinating care with families	_____	_____
IX.	Coping with Caregiving		
A.	Learning your limits	_____	_____
B.	Recognizing your own stress	_____	_____
C.	Stress Reduction	_____	_____
D.	Value of respite and breaks	_____	_____
<hr/>			
X.	Activities; Plans of Care		
A.	Individual care plan	_____	_____
B.	Schedule of activities	_____	_____
C.	Meals and snacks	_____	_____
D.	Community meetings	_____	_____

E.	Special Events	_____	_____
F.	Hall Monitoring	_____	_____
G.	Patient Records	_____	_____
H.	Day sheet	_____	_____
I.	Noteworthy Event forms	_____	_____
J.	Elder abuse, Recognition and Reporting	_____	_____
K.	Transportation	_____	_____
L.	Access to related services	_____	_____
M.	Admission and Discharge Criteria	_____	_____
N.	Advanced Directives	_____	_____
XI.	Shadow program		
A.	Purpose and Objectives	_____	_____
B.	Implementation	_____	_____
XII.	Internship		
	(20 hrs supervised on the job training)	_____	_____
XIII.	Community Resources		
A.	AD ASSOCIATION	_____	_____
B.	AAA	_____	_____
C.	Elderlink and other referral sources	_____	_____
XIV.	Ongoing Education & Support	_____	_____